

**LEGISLATIVE SERVICES AGENCY  
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**FISCAL IMPACT STATEMENT**

**LS 7042**

**BILL NUMBER:** SB 336

**NOTE PREPARED:** Jan 4, 2006

**BILL AMENDED:**

**SUBJECT:** Care and Management of Student Diabetes at School.

**FIRST AUTHOR:** Sen. Landske

**BILL STATUS:** As Introduced

**FIRST SPONSOR:**

**FUNDS AFFECTED:** X GENERAL  
DEDICATED  
FEDERAL

**IMPACT:** State & Local

**Summary of Legislation:** *Student Diabetes Training Program:* The bill establishes a training program for school employees who are not health care professionals to assist students with diabetes in managing and treating the diabetes.

*Individualized Student Health Plans:* The bill sets forth requirements for individualized health plans for students who will be managing and treating diabetes while at school or school activities.

**Effective Date:** July 1, 2006.

**Explanation of State Expenditures:** *Student Diabetes Training Program:* The State Department of Health would be required to develop a training program for school care assistants under the guidelines specified in the bill. The bill does not make an appropriation to cover the development of the guidelines. The Department should be able to develop the program within their existing level of resources.

The Department of Health was appropriated \$27.3 M in FY 2006 and \$27.3 M in FY 2007 by the General Assembly. The Department reverted \$417,320 in FY 2005 to the state General Fund.

**Explanation of State Revenues:**

**Explanation of Local Expenditures:** *Student Diabetes Training Program:* Under the bill, any public school with a diabetic student enrolled would be required to staff: one care assistant (if the school employs a full-time nurse) or three care assistants (if the school does not have a full-time nurse). Existing staff would be trained

by either a health care professional or a school nurse. The impact of this provision to school expenditures would depend on the arrangement made between the school and the employee trained to be a care assistant. Most if not all expenses could be mitigated if either a school nurse or volunteer health professional were to provide the training within the normal course of business. Once a school had the required persons trained, the school would not need to further train individuals unless the trained staff member(s) were to end their employment at the school.

*Individualized Student Health Plans:* Under the bill, school principals and nurses would be required to develop a health plan with each diabetic student in attendance at the school. Principals and nurses would likely require additional administrative time to compile and implement student health plans. Schools would likely be able to accomplish both provisions within existing resources.

*Background Information:* Current law requires that school employees who are responsible for administering injectable insulin or glucose testing and are not certified in a medical field must obtain training from a medical practitioner or licensed nurse. There are approximately 1,138 nurses on staff within the state's public school system. There are approximately 1,900 public school buildings in Indiana.

**Explanation of Local Revenues:**

**State Agencies Affected:** Department of State Health.

**Local Agencies Affected:** Schools.

**Information Sources:** DOE SAS DATABASES; State Budget Agency: *FY2005 General and Rainy Day Fund Summaries*; State of Indiana: *List of Appropriations July 1, 2005 to June 30, 2007*.

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